

# Mooresville Metropolitan Police Department

## Police Officer Employment Application

Please print and complete all the information below

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ OLN: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Current Employer: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Telephone: \_\_\_\_\_

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1. Are you an Indiana Law Enforcement Academy graduate? If so, please list your class and completion date:

\_\_\_\_\_

2. Are you a Veteran of the military services? If so, please list your years of service and branch:

\_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_